

Abstract 679

TITLE: Pilot Results of a Brief Intervention to Reduce High-Risk Sex Among HIV Seropositive Gay and Bisexual Men

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BACKGROUND/OBJECTIVES: Rates of unprotected anal sex among HIV+ men who have sex with men (MSM) rival those reported by HIV- MSM. We are testing motivational enhancement interviewing as a brief intervention for reducing the incidence of unprotected anal sex with partners whose serostatus is negative or not known. The project is a partnership between the UW School of Social Work and People of Color Against AIDS Network (POCAAN).

METHODS: Participants are recruited through HIV care service providers, ads in the gay press and word of mouth referrals. Men are eligible if they are HIV+, 18 or older, and report anal sex (protected or unprotected) with a male partner in the past 4 months. We exclude men whose sexual activity has occurred entirely within the context of a mutually monogamous, seroconcordant relationship of at least one year's duration. The intervention consists of an interview and a feedback session for which participants are paid \$50. In the first encounter they complete a structured, closed-ended questionnaire that includes detailed information about each of their anal and vaginal sex partners of the past four months (up to 4 partners). The second session consists of a discussion of information they provided in the questionnaire, selected to highlight areas of conflict between values, beliefs and risky sexual behaviors. Staff explores these conflicts with participants and support and amplifies self-motivating statements by respondents that indicate some interest in risk reduction. At 6 months, the interview and feedback sessions are repeated and participants are again paid \$50.

RESULTS: Data collection is on-going and updated results will be reported at the conference. As of this writing, 107 men have done baseline sessions and 38 have completed 6-month follow-up sessions. Mean age is 39, range is 20-62. Men of color comprise 36% of the sample, roughly double their representation among local AIDS cases. On average, the men have known they are seropositive for 8 years (range 1 month - 17 years). Nearly 2/3 are disabled, 62% receive HAART, and 74% have annual incomes of less than \$15,000. Respondents reported anal sex during the prior 4 months with a total of 466 partners. Detailed partner data were obtained for 253 of them, and represent complete partner reporting for 83% of respondents. Half of the participants (53/107) said they had unprotected anal sex (UA) with 88 partners whose serostatus was negative or not known by the respondent. Among this group, 30 reported UA with 51 partners who may not have known the respondent was seropositive. Data from the first 38 participants to complete the 6-month follow-up show a 31% reduction at follow-up in the proportion of men who report unprotected anal sex with a partner of negative or unknown serostatus.

CONCLUSION: This brief intervention shows promise for reducing transmission risks among a group at high risk for causing new HIV infections.

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